

# SMH/CVH Flex Grant 2008

Integration of Reports into the  
Electronic Medical Record for  
SMH and CVH



Presented by

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# Our Objective

Improve the quality of health care in the rural setting with increased information and access within a central EMR.

# Plans to reach our goal

- Expand the existing EMR to include dictated reports
- Apply software interface with our current EMR to improve the efficacy of the transcriptionists



# St. Mary's and Clearwater Valley Hospital and Clinics

- Both are critical access hospitals 60 miles apart
- Physicians provide care to rural populations in 3 counties with access to 7 primary care and 4 physical therapy outlying clinics
  - SMH has 7 primary care providers + 3 midlevel
  - CVH has 8 primary care providers + 3 ER physicians + 3 midlevel
- Shared resources
  - Joint managers and shared staff
  - Supplies, similar equipment to share costs and maintenance
- Meditech: Shared/regional electronic medical records and informatics system
  - Connected in all locations

# The Process

Our Challenges and Successes



How did it ever  
happen?



# Challenges





# Change my process?

- It already works fine for me this way.



# What were we thinking?

- Physicians and managers all agree on one thing?
- Everyone is too busy.
- Everyone has to learn something new and different.
- Not enough time in the day.
- Obstacles such as weather, schedules, technical changes in a rural area.



# What happened?





# We talked...

- All the players
- In the same room
- Everyone had a voice



# and we talked some more...

- What is our current process?
- What do we want to achieve?





Better relationships  
and communication





Staff began to see  
the bigger picture







They saw the successes





They were willing to try something new

# What happened?

- Developed a plan for implementation of the new system
- Agreed upon dictation devices
- Agreed upon formats for the reports

Everyone had some buy in for the project





# It happened!

- Better relationships and communication
- Staff began to see the bigger picture
- They saw some successes
- They were willing to try something new

Everyone had some buy in for the project



# Implementation

- Took longer than expected
- Researched and selected interface vendor
- April 2008: SHAMS met with staff
- Dictionaries and report formats developed
- Selected transcription devices
- July: Physician and staff training
- August: Interface installed with Meditech
- September: LIVE with transcription
- October: Viewing Reports in PCI

# Transcription

- Replaced 32 old units with portable Phillips Digital Dictation devices
- New servers installed
- Transcription gear (foot peddles) added
- High-speed wireless internet access with VPM connection at home

# Reports

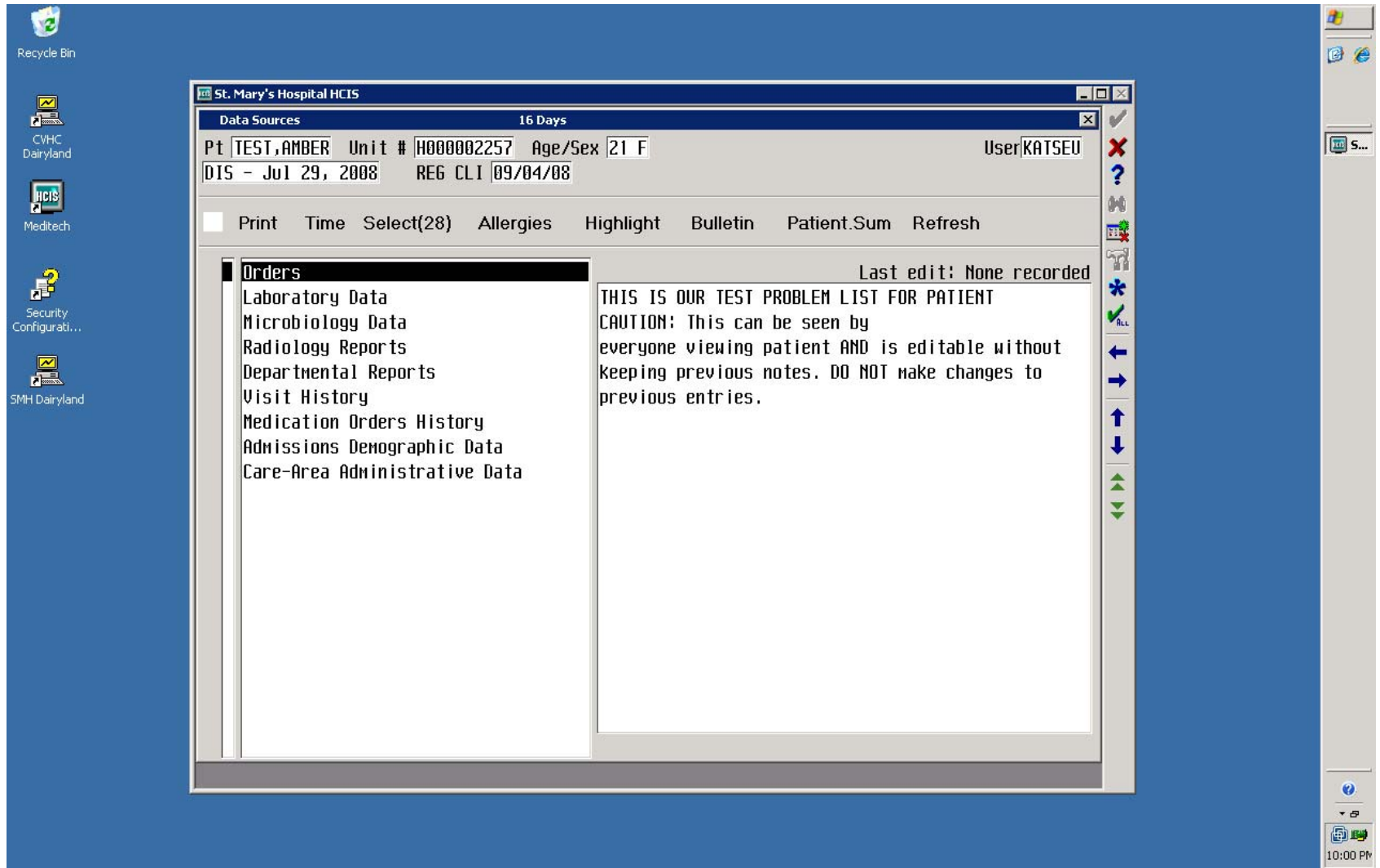
- Standardized formats with override ability to customize when necessary
- Accuracy of patient name, account number, and visit dates
- Viewed instantly in PCI from any location
- Decreased copies printed
- Controlled access to view reports



# PCI Access in Meditech

- Patient demographics
- Lab results
- Radiology reports
- Medication/Pharmacy
- And as of October 2008  
included...Dictated reports!

# PCI Menu



# Successes

- Transcription

“Typing time is so much faster. The correct format for the particular reports defaults the information in, such as the headers and footers, along with the patient's name and date. We are more accurate.”

# Successes

- Physicians

“The dictation devices are easy to use.”

“I can see a patient in Kamiah and dictate a clinic note, drive home to Cottonwood, and view the dictation at the hospital. Before I would have to call and ask for a copy from the chart to be faxed up.”

“A patient of mine was seen in Orofino this morning, and didn't mention this in the ER later. When I looked at their record in PCI I saw this and didn't have to order labs that were already done today.”



# Successes

- Nursing, physical therapy, ancillary staff, and physicians are now able to view dictation in the EMR. This has reduced time spent tracking records, making copies, and faxing.
- Patient care improves with medical staff having immediate access to the record. Better decisions in health care can be made with current data available.



# Successes

Two groups with different facilities and processes have come together and united to improve patient care

